

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

Serial No.
Application

Filing Date

10/581276

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52						
3		1					53						
4		1					54						
5							55						
6	1						56						
7		1					57						
8	1		1				58						
9			1				59						
10		1	1				60						
11		1	1				61						
12			1				62						
13			1				63						
14			1				64						
15	1						65						
16		1					66						
17		1					67						
18			1				68						
19			1				69						
20			1				70						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	5												
TOTAL DEP.	15												
TOTAL CLAIMS	20												